



FORM  
GD1  
(Rev. 5/2012)



# HAWAII STATE ETHICS COMMISSION GIFTS DISCLOSURE STATEMENT

(This report covers the period from June 1 of the preceding calendar year through June 1 of this year and is due by June 30)

'12 JUN 29 AIO :20

STATE OF HAWAII  
STATE ETHICS COMMISSION

## FILER

Kidani Michelle N.  
Last Name First Name M.I.  
Hawaii State Senate Senator  
State Agency State Position

## CONTACT INFORMATION

Hawaii State Capitol, Room 228  
415 South Beretania St.  
Number and Street or P.O. Box  
Honolulu Hi 96813  
City State Zip Code  
(808) 586-7100 senkidani@capitol.hawaii.gov  
Telephone Extension Email Address

## GIFT INFORMATION (LIST EACH GIFT SEPARATELY)

- Donor: National Hispanic Caucus of State Legislators Date Received: Nov. 2011  
Gift (Description): Scholarship for Travel/ NHCSL 9th National Summit Value/Cost: \$1,886.00
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_
- Donor: \_\_\_\_\_ Date Received: \_\_\_\_\_  
Gift (Description): \_\_\_\_\_ Value/Cost: \_\_\_\_\_



Check here if additional sheets are attached

CERTIFICATION: I hereby certify that the above is a true, correct, and complete statement.

Signature

*Michelle N. Kidani*

Date

6/27/2012

REC'D BY STATE MESSENGER